

**UTILITY
PATENT APPLICATION
TRANSMITTAL**

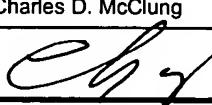
(Only for new non-provisional applications under 37CFR§1.53(b))

Attorney Docket No.		CDM:3912.9999
First Inventor or Application Identifier		Peñes
Title	Swab Having Easily Displaceable Tip for Collecting Saliva Samples and Inserting Them Into Test Tube	
Express Mail Label No.		

19587 U.S. PRO
10/615712
07/08/03



APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.		Assistant Commissioner for Patents ADDRESS TO: Box Patent Application Washington, D.C. 20231																									
<p>1. <input checked="" type="checkbox"/> *Fee Transmittal Form (e.g. PTO/SB/17) (Submit an original and a duplicate for fee processing)</p> <p>2. <input checked="" type="checkbox"/> Applicant claims small entity status See 37 C.F.R. 1.27</p> <p>3. <input checked="" type="checkbox"/> Specification [Total pages 6] (preferred arrangement set forth below) <ul style="list-style-type: none"> - Descriptive Title of the Invention - Cross References to Related Applications - Statement Regarding Federally Sponsored R&D - Reference to sequence listing, a table or a computer program listing - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure </p> <p>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Pages 1]</p> <p>5. Oath or Declaration [Total 2] <ul style="list-style-type: none"> a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. §1.63(d)) (for continuation/divisional with Box 17 completed) <ul style="list-style-type: none"> I. <input type="checkbox"/> <u>Deletion of Inventor(s)</u> Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§1.53(d)(2) and 1.33(b) </p> <p>6. <input type="checkbox"/> Application Data Sheet. See 37 C.F.R. 1.76</p> <p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table, or Computer Program (Appendix)</p> <p>8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) <ul style="list-style-type: none"> a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on <ul style="list-style-type: none"> i. <input type="checkbox"/> CD-ROM or CD-R (2 copies) or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statement verifying identity of above copies </p>																											
ACCOMPANYING APPLICATION PARTS																											
<p>9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>10. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney (when there is an assignee)</p> <p>11. <input type="checkbox"/> English translation document (if applicable)</p> <p>12. <input type="checkbox"/> Information Disclosure Statement (IDS) /PTO SB08 <input type="checkbox"/> Copies of IDS Citations</p> <p>13. <input type="checkbox"/> Preliminary Amendment</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (should be specifically itemized)</p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)</p> <p>16. <input type="checkbox"/> Request and Certification under 35 U.S.C.122(b)(2)(B)(i) Applicant must attach form PTO/SB/35 or its equivalent.</p> <p>17. <input checked="" type="checkbox"/> Other Statement of Status as a Small Entity</p>																											
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 C.F.R. 1.76.																											
<p><input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.: /</p> <p>Prior application information: Examiner _____ Group No./Art Unit _____</p> <p>For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p>																											
17. CORRESPONDENCE ADDRESS																											
<input type="checkbox"/> Customer Number or Bar Code Label		(Insert customer number or attach bar code label here)																									
<table border="1"> <tr> <td>Name</td> <td colspan="3">Chernoff Vilhauer McClung & Stenzel, L.L.P.</td> </tr> <tr> <td>Address</td> <td colspan="3">1600 ODS Tower, 601 SW Second Avenue</td> </tr> <tr> <td>City</td> <td>Portland</td> <td>State</td> <td>OR</td> </tr> <tr> <td>Country</td> <td>USA</td> <td>Telephone</td> <td>503.227.5631</td> </tr> <tr> <td>Zip Code</td> <td colspan="3">97204-3157</td> </tr> <tr> <td>FAX</td> <td colspan="3">503.228.4373</td> </tr> </table>				Name	Chernoff Vilhauer McClung & Stenzel, L.L.P.			Address	1600 ODS Tower, 601 SW Second Avenue			City	Portland	State	OR	Country	USA	Telephone	503.227.5631	Zip Code	97204-3157			FAX	503.228.4373		
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FAX	503.228.4373																										
Name (print/ type)		Registration No. (Attorney/Agent)																									
Signature		Date																									



FEE TRANSMITTAL for FY 2003

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37CFR 1.27

TOTAL AMOUNT OF PAYMENT

\$415

Complete If Known

Application Number

Herewith

Filing Date

First Named Inventor

Pestes

Examiner Name

Art Unit

Attorney Docket No.

CDM:3912.9999

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order Other None

Deposit Account

Deposit Account Number

03-1550

Deposit Account Name

Chernoff Vilhauer McClung & Stenzel

The Commissioner is authorized to: (check all that apply)

Charge fees indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of this application
 Charge any fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Code (\$)	Code (\$)		
1001 750	2001 375	Utility filing fee	375
1002 330	2002 165	Design filing fee	
1003 520	2003 260	Plant filing fee	
1004 750	2004 375	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
SUBTOTAL (1)			\$375

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Indep. Claims	Extra Claims	Fee from below	Fee Paid
Large Entity	Small Entity			
Fee Code (\$)	Fee Code (\$)			
1202 18	2202	9	Claims in excess of 20	
1201 84	2201	42	Independent claims in excess of 3	
1203 280	2203	140	Multiple dependent claim, if not paid	
1204 84	2204	42	**Reissue independent claims over original patent	
1205 18	2205	9	*Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)				\$0

**or number of previously paid, if greater. For reissues, see above.

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge-late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	410	2252	205	Extension for reply within second month	
1253	930	2253	465	Extension for reply within third month	
1254	1,450	2254	725	Extension for reply within fourth month	
1255	1,970	2255	985	Extension for reply within fifth month	
1401	320	2401	160	Notice of Appeal	
1402	320	2402	160	Filing a brief in support of an appeal	
1403	280	2403	140	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,300	2453	650	Petition to revive - unintentional	
1501	1,300	2501	650	Utility issue fee (or reissue)	
1502	470	2502	235	Design issue fee	
1503	630	2503	315	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Stmt.	
8021	40	8021	40	Recording each patent assignment per property (times no. of properties) - total assignments	1
1809	750	2809	375	Filing a submission after final rejection (37 C.F.R. 1.129(a))	
1810	750	2810	375	For each additional invention to be examined (37 CFR 1.129(b))	
1801	750	2801	375	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	
Other fee (specify)					

* Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

\$40

SUBMITTED BY

Complete (if applicable)

Name (print type) Charles D. McClung Registration No. 26,568 Telephone (503) 227-5631

Signature  Date July 8, 2003

CERTIFICATE OF MAILING
BY "EXPRESS MAIL"

Express Mail No. EL 915424221 US

Date of Deposit: July 8, 2003

I hereby certify that the attached patent application for SWAB HAVING EASILY DISPLACEABLE TIP FOR COLLECTING A SALIVA SAMPLE AND INSERTING IT INTO A COLLECTION DEVICE, AND METHOD OF USING SAME; including specification; one sheet of drawings; Power of Attorney; Statement of Status as Small Entity in Accordance with 37 CFR §1.27; unnotarized Assignment dated April 25, 2003 assigning the patent application to MML Diagnostics Packaging, Inc., an Oregon corporation, from the inventory, Larry Pestes; duplicate Fee Transmittal form FY 2003 covering filing fees of \$375 and recordation fees of \$40; Utility Patent Application Transmittal of Charles D. McClung, Esq., dated July 8, 2003; and a return, acknowledgment postcard, are being deposited with the United States Postal Service "Express Mail to Addressee" service on the date indicated above and is addressed to the Mail Stop Patent Applications, Commissioner for Patents, Post Office Box 1450, Alexandria, VA 22313-1450.



Cristie March